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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted With Initial
Filing Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number		PU020128
First Named Inventor		S. Choksi, et al.
COMPLETE IF KNOWN		
Application Number	/	
Filing Date		
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**DEFLECTION SUPPLY VOLTAGE FEEDBACK CONTROL IN CONJUNCTION
WITH FREQUENCY CHANGE**

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

ApplicationNumber(s)	Filing Date (MM/DD/YYYY)	
60/374,281	04/19/2002	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number _____
or Bar Code Label _____ OR Correspondence address below

Name	JOSEPH S. TRIPOLI		
Address	THOMSON MULTIMEDIA LICENSING INC.		
Address	P.O. Box 5312		
City PRINCETON	State NJ	ZIP 08543-5312	
Country USA	Telephone (609) 734 - 6812	Fax (609) 734 - 6888	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <i>SNEHALI</i>		Family Name CHOKSI	
Inventor's Signature <i>Michela</i>	X	Date MAY 13, 2003 X	
Residence: City Fort Wayne	State IN	Country USA	Citizenship IN
Mailing Address 7539 Mill Run Road			
Mailing Address			
City Fort Wayne	State IN	ZIP 46819	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <i>ROBERT JOSEPH</i>		Family Name GRIES	
Inventor's Signature		Date	
Residence: City Indianapolis	State IN	Country USA	Citizenship USA
Mailing Address 6143 Irwin Court			
Mailing Address			
City Indianapolis	State IN	ZIP 46237	Country USA
<input checked="" type="checkbox"/> Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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Name	JOSEPH S. TRIPOLI				
Address	THOMSON MULTIMEDIA LICENSING INC.				
Address	P.O. Box 5312				
City PRINCETON		State NJ	ZIP 08543-5312		
Country USA	Telephone (609) 734 - 6812				Fax (609) 734 - 6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	SNEHALI	Family Name CHOKSI or Surname			
Inventor's Signature				Date	
Residence: City Fort Wayne	State IN	Country USA	Citizenship IN		
Mailing Address	7539 Mill Run Road				
Mailing Address					
City Fort Wayne	State IN	ZIP 46819	Country USA		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	ROBERT JOSEPH	Family Name GRIES or Surname			
Inventor's Signature	<i>Robert Joseph Gries</i>	Date	<i>MAY 12, 2003 R.J.G.</i>		
Residence: City Indianapolis	State IN	Country USA	Citizenship USA		
Mailing Address	6143 Irwin Court				
Mailing Address					
City Indianapolis	State IN	ZIP 46237	Country USA		
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
KEVIN MICHAEL		WILLIAMS			
Inventor's Signature	<i>Kevin Michael Williams</i>			Date 6/15/03	
Residence: City	Indianapolis	State	IN	Country	USA
Mailing Address	6101 N. Primrose Avenue				
Mailing Address					
City	Indianapolis	State	IN	ZIP	46220
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname			
DAVID ROSS		JACKSON			
Inventor's Signature				Date	
Residence: City	Indianapolis	State	IN	Country	46205
Mailing Address	4422 Abby Creek Lane				
Mailing Address					
City	Indianapolis	State	IN	Zip	46205
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname			
ROBERT GOAH		WATSON, III			
Inventor's Signature				Date	
Residence: City	Noblesville	State	IN	Country	USA
Mailing Address	18561 Wychwood Place				
Mailing Address					
City	Noblesville	State	IN	Zip	46060
Country	USA				

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KEVIN MICHAEL		WILLIAMS			
Inventor's Signature				Date	
Residence: City	Indianapolis	State	IN	Country	USA
Mailing Address 6101 N. Primrose Avenue					
Mailing Address					
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
DAVID ROSS		JACKSON			
Inventor's Signature				Date	15 May 2003 X
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Mailing Address 4422 Abby Creek Lane					
Mailing Address					
City	Indianapolis	State	IN	Zip	46205
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
ROBERT GOAH		WATSON, III			
Inventor's Signature				Date	
Residence: City	Noblesville	State	IN	Country	USA
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Mailing Address					
City	Noblesville	State	IN	Zip	46060
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Inventor's Signature				Date	
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ROBERT GOAH		WATSON, III			
Inventor's Signature	<i>Robert Goah Watson DR</i>			Date	<i>5/13/03 X</i>
Residence: City	Noblesville	State	IN	Country	USA
Mailing Address 18561 Wychwood Place					
Mailing Address					
City	Noblesville	State	IN	Zip	46060
Country		USA			

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